MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

\$ERIAI NO. 10 09 800 APPLICANT(S)

FILING DATE

CLAIMS

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CLAIMS		ALCOHOL: SPEC		ENSKWICE.		A Verific

*MAY BE USED FOR ADDITIONAL CLAMS OR ADMENDMENTS

Barbara Campbell National Stage Processing (703) 305-3831

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